



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 5237

SERIAL NUMBER 09/900,503	FILING DATE 07/06/2001 RULE	CLASS 600	GROUP ART UNIT 3732 3625	ATTORNEY DOCKET NO. GUID012CON
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APPLICANTS M.G. 9/29/06
 Lawrence W. Hu, Mountain View, CA;
 David J. Paul, Scotts Valley, CA;
 Eugene Edward Reis, San Jose, CA;
 Harry Leonard Green II, Santa Cruz, CA;

** CONTINUING DATA *****
 THIS APPLICATION IS A CON OF 09/305,811 05/04/1999 PAT 6,283,912
Jan (oh)

** FOREIGN APPLICATIONS *****
Jan (now)

IF REQUIRED FOREIGN FILING LICENSE GRANTED
 ** 08/08/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 34	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2
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Verified and Acknowledged *Signature* Examiner's Signature Initials

ADDRESS
 Alan W. Cannon
 Bozicevic, Field and Francis LLP
 Suite 200
 200 Middlefield Road
 Menlo Park, CA 94025

TITLE
 Surgical retractor ~~platform blade apparatus~~ and system M.G. 9/29/2006

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Eugene Edward Reis, San Jose, CA;
Harry Leonard Green II, Santa Cruz, CA;

**** CONTINUING DATA *******
THIS APPLICATION IS A CON OF 09/305,811 05/04/1999 PAT 6,283,912
Jan (ok)

**** FOREIGN APPLICATIONS *******
Jan (none)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 08/08/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 34	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
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TITLE
Surgical retractor platform blade apparatus

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit